



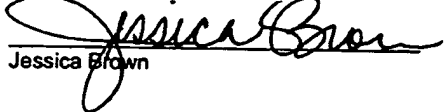
10/776,927

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

CERTIFICATE OF MAILING

I hereby certify that on January 11, 2005, which is the date I am signing this certificate, I am depositing this correspondence the United States Postal Service, first class mail, in an envelope addressed to the MAIL STOP AMENDMENT FEE, Commissioner of Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.


Jessica Brown

Applicant: SVENSSON

Serial No.: 10/776,927

Title: LINE REFLECTION REDUCTION
WITH ENERGY-RECOVERY DRIVER

Filed: February 10, 2004

Atty. Docket No. 61450-031

Examiner: NGUYEN, John B.

Group Art Unit: 2819

Customer Number: 33401

Fee only

MAIL STOP AMENDMENT FEE
Commissioner for Patents
P.O. Box 1450,
Alexandria, Virginia 22313-1450

INFORMATION DISCLOSURE STATEMENT
UNDER 37 C.F.R. § 1.56

Sir:

Pursuant to 37 C.F.R. § 1.56, § 1.97 and § 1.98, Applicant brings the references listed on the attached Form PTO-1449 to the examiner's attention. 37 C.F.R. § 1.56. These references may be material to examination of the above-identified application. Please do not construe the filing of this information disclosure statement as a representation that applicant has made a search (37 C.F.R. § 1.97(g)), or as an admission that the information cited is, or is considered to be, material to patentability, or that no other material information exists. We enclose copies of the cited documents.

This Information Disclosure Statement is being submitted:

- ☐ 1. Within three months of the filing date of a national application other than a continued prosecution application under 37 CFR 1.53(d), or within three months of the date of entry of the national stage as set forth in 37 CFR 1.491 in an international application; or before the mailing date of a first Office action on the merits, and therefore, Applicant believes no fee is required;
- ☒ 2. After the period specified in paragraph (1) hereinabove of this section, but is being filed before the mailing date of either a final action under 37 CFR 1.113, or a notice of allow-

PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

10776927

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	minus 20 =	*
INDEPENDENT CLAIMS	minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A	1-1805	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	24	Minus	** 20 = 4
	Independent	*	2	Minus	*** 3 = -
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

(Column 1) (Column 2) (Column 3)

AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*		Minus	** =
	Independent	*		Minus	*** =
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

(Column 1) (Column 2) (Column 3)

AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*		Minus	** =
	Independent	*		Minus	*** =
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

RATE	FEE		RATE	FEE
BASIC FEE	395.00	OR	BASIC FEE	790.00
X\$ 25 =		OR	X\$ 50 =	
X 100 =		OR	X 200 =	
+ 180 =		OR	+ 360 =	
TOTAL		OR	TOTAL	

SMALL ENTITY OR

OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X\$ 25 =		OR	X\$ 50 =	200
X 100 =		OR	X 200 =	
+ 180 =		OR	+ 360 =	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	200

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X\$ 25 =		OR	X\$ 50 =	
X 100 =		OR	X 200 =	
+ 180 =		OR	+ 360 =	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X\$ 25 =		OR	X\$ 50 =	
X 100 =		OR	X 200 =	
+ 180 =		OR	+ 360 =	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.